



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street
Boston, MA 02114
www.mass.gov/abcc

ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 054600001

CITY OR TOWN HUBBARDSTON

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: PEACEFUL ACRES INC.

DOING BUSINESS AS

ADDRESS FLAGG ROAD

CITY/TOWN: HUBBARDSTON

STATE: MA

ZIP CODE: 01452

MANAGER: CURTIS, CAROL

TYPE OF LICENSE: General on
premise

CATEGORY: Wine and
Malt Regular

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

TWO FLOORS. TOP FLOOR-ONE ROOM. BOTTOM FLOOR; LADIES AND MENS ROOMS,
STORAGE ROOM, FURNACE ROOM

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

We the undersigned, attest that we are in possession (1) the certificate required by Chapter 304 of the Acts of 2004, signed by the building inspector and the head of the fire department for the above named license and (2) the certificate of liquor liability insurance required by Chapter 116 of the Acts of 2010.

Please Check Below:

APPROVED: ☐

DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE:



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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 054600003

CITY OR TOWN HUBBARDSTON

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: RONALD LEVESQUE

DOING BUSINESS A RIETTA FLEA MARKET

ADDRESS GARDNER RD-RTE.68

CITY/TOWN: HUBBARDSTON

STATE: MA

ZIP CODE: 01452

MANAGER:

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

PRESENT; DINING ROOM, FIRST FLOOR. EXTENSION; LARGER DINING AREA AND
OUTDOOR BEER GARDEN

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SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

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DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE:

APPLICATION FOR RENEWAL MUST BE FILED BY LICENSEES DURING THE MONTH OF NOVEMBER (M.G.L. Ch. 138 § 16A)



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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 054600004

CITY OR TOWN HUBBARDSTON

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: HUBBARDSTON ROD AND GUN CLUB, INC.

DOING BUSINESS AS

ADDRESS 55 WILLIAMSVILLE ROAD

CITY/TOWN: HUBBARDSTON

STATE: MA

ZIP CODE: 01452

MANAGER: VALLEY, JAY
PAUL

TYPE OF LICENSE: Club

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

TWO ROOMS, TWO FLOORS

I hereby certify and swear under penalties of perjury that:

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SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

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OFF-PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 054600006

CITY OR TOWN HUBBARDSTON

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: GLOBAL MONTELLO GROUP CORP

DOING BUSINESS AS MR. MIKES

ADDRESS 35 MAIN STREET

CITY/TOWN: HUBBARDSTON

STATE: MA

ZIP CODE: 01452

MANAGER: NEAL, SHARON

TYPE OF LICENSE: Package Store

CATEGORY: All Alcohol

EMAIL ADDRESS:

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DESCRIPTION OF LICENSED PREMISES:

RETAIL STORE APPROX. 90'X40' AKK ALCOHOL TO RIGHT AT THE SALES AREA, NIPS & PINTS WILL BE LOCATED ON WALL BEHIND SALES AREA. BEER AND WINE WILL BE IN COOLERS. SPIRITS AND WINE WILL BE LOCATED TO LEFT. ALCOHOL WILL BE STORED IN AREA AT FRONT & BACK OF STORE.

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3. the premises are now open for business (If not explain below)

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Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

Please Check Below:

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OFF-PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 054600012

CITY OR TOWN HUBBARDSTON

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: HANY TADROUS

DOING BUSINESS A HUBBARDSTON MARKET

ADDRESS 32 MAIN STREET

CITY/TOWN: HUBBARDSTON

STATE: MA

ZIP CODE: 01452

MANAGER: TADROUS, HANY TYPE OF LICENSE: Package Store CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

MINI MARKET SELLING GROCERIES BEER, WINE, CIGARETTES AND DELI

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TELEPHONE NUMBER:

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APPLICATION FOR RENEWAL:

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LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: NICEL INC.

DOING BUSINESS AS PIZZA PALACE

ADDRESS 53 GARDNER ROAD

CITY/TOWN: HUBBARDSTON

STATE: MA

ZIP CODE: 01452

MANAGER: OURDAS,
DEMETRA T.

TYPE OF LICENSE: Restaurant

CATEGORY: Wine and
Malt Regular

EMAIL ADDRESS:

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